

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant or Patentee: Linda Gillian Durrant et al.

Atty. Docket No.: 0380-P02284USO

Serial or Patent No.: 09/623,035

Filed or Issued:

For: TUMOUR ASSOCIATED ANTIGEN 791Tgp72

VERIFIED STATEMENT (DECLARATION) SUPPORTING ANOTHER'S CLAIM FOR SMALL ENTITY STATUS [37 CFR §1.9(f) AND §1.27(d)] - NONPROFIT ORGANIZATION

I hereby declare that I am making this verified statement to support a claim by the above-identified applicant or patentee for small entity status for purposes of paying reduced fees with regard to the above-identified invention described in

☐ the specification filed herewith

☒ International Application Serial No. PCT/GB99/00582, filed 26 February 1999

☐ U.S. Patent No. _____, issued _____

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

FULL NAME OF ORGANIZATION:

Cancer Research Campaign Technology Limited

TYPE OF ORGANIZATION

- ☐ University or other institution of Higher education
☐ Tax exempt under U.S. Internal Revenue Code [26 USC §501(a) and
☐ Nonprofit scientific or educational under statute of state of U.S.A.

ADDRESS OF ORGANIZATION:

Cambridge House, 6-10 Cambridge Terrace,
Regent's Park, London NW1 4JL

Name of State:

Citation of Statute:

- ☐ Would qualify as tax exempt under U.S. IRC if located in U.S.A.
☐ Would qualify as nonprofit scientific or education under statute of
state of U.S.A if located in U.S.A.

Name of State:

Citation of Statute:

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR §1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States code to the above-identified invention.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization known to have rights to the invention is listed below* and the organization knows of no rights to the invention being held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR §1.9(c) if that person had made the invention, or by any concern which would not qualify as a small business concern under 37 CFR §1.9(d) or by a nonprofit organization under 37 CFR §1.9(e).

FULL NAME: VIRAGEN (SCOTLAND) LTD 191 WEST GEORGE STREET GLASGOW G2 2LB

ADDRESS:

- ☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

- ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

- ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR §1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing:

Title in Organization:

Address:

Signature:

Date:

25/8/00

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant or Patentee: Linda Gillian Durrant et al Atty. Docket No. 0380-P02284US0

Application or Patent No.: 09/623,035

Filed or Issued:

For: Tumor Associated Antigen 791Tgp72

**VERIFIED STATEMENT (DECLARATION) SUPPORTING ANOTHER'S CLAIM FOR
SMALL ENTITY STATUS [37 CFR §1.9(f) and §1.27(c)] - SMALL BUSINESS CONCERN**

I hereby declare that I am making this verified statement to support a claim by the above-identified applicant or patentee for small entity status for purposes of paying reduced fees with regard to the above-identified invention described in

☐ the specification filed herewith

☐ U.S. Patent Application No. _____, filed _____

☐ U.S. Patent No. _____, issued _____

☒ International Application No. PCT/GB99/00582, Filed 26 February 1999

I hereby declare that I am empowered to act on behalf of the small business concern identified below:

☐ I am the owner.

☒ I am empowered to act as MANAGING DIRECTOR of the concern.

Full name of the concern: Viragen (Scotland) Ltd

Address of the concern: PENTLAND SCIENCE PARK, PENICUIK, MIDLOTHIAN
EH26 0P2, UK

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR §121.3-18, and reproduced in 37 CFR §1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the above-identified small business concern with regard to the above-identified invention.

If the rights held by the small business concern are not exclusive, each individual, concern or organization known to have rights to the invention is listed below* and the concern knows of no rights to the invention being held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR §1.9(c) if that person had made the invention, or by any concern which would not qualify as a small business concern under 37 CFR §1.9(d) or by a nonprofit organization under 37 CFR §1.9(e).

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

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I acknowledge the duty to file, in this application or patent, notification of any changes in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing: DR. D. M. NICOLSON

Title in Organization : MANAGING DIRECTOR

Address : PENTLAND SCIENCE PARK, PENICUIK, MIDLOTHIAN EH26 0P2

Signature : [Signature] Date: 20.9.2000

DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention entitled: **TUMOUR ASSOCIATED ANTIGEN 791Tgp72**

the specification of which [check one(s) applicable]

☒ was filed 26 February 1999 as International Application No. PCT/GB99/00582
☐ and was amended by Amendment filed _____ (if applicable); [or];
☐ is attached to this Declaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Rule 56(a) [37CFR1.56(a)].

CLAIM UNDER 35 USC §119: I hereby claim foreign priority benefits under 37 USC §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Application No.	Country	Day-Mo-Year	Yes - No
9804065.2	Great Britain	26-02-98	Yes

POWER OF ATTORNEY: As inventor, I hereby appoint **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA, and the following individual(s) as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Patrick J. Hagan, Reg. No. 27,643, Janet E. Reed, Reg. No. 36,252 and Henry H. Skillman, Reg. No. 17,352.**

POWER TO INSPECT: I hereby give **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

SEND CORRESPONDENCE TO: DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.

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Suite 720

Philadelphia, Pennsylvania 19103-2307

Telephone: (215) 563-4100
Facsimile: (215) 563-4044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST JOINT INVENTOR

Full Name Linda Gillian DURRANT
First Middle Last
Signature [Signature]
Date 23-08-00
Residence Nottingham GB GB3
City State or Country
Citizenship GB

SECOND JOINT INVENTOR (IF ANY)

Full Name Ian SPENDLOVE
First Middle Last
Signature [Signature]
Date 23/08/00
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Hospital, CRC Technology Limited, Dept. of Clinical
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THIRD JOINT INVENTOR (IF ANY)

Full Name _____
First Middle Last
Signature _____
Date _____
Residence _____
City State or Country
Citizenship _____
Post Office Address: _____
City State or Country Zip Code

FOURTH JOINT INVENTOR (IF ANY)

Full Name _____
First Middle Last
Signature _____
Date _____
Residence _____
City State or Country
Citizenship _____
Post Office Address: _____
City State or Country Zip Code